



DENTAL INSURANCE - GENERAL FAQs

1. WHAT ARE THE GROUP NUMBERS, PHONE NUMBERS, AND WEB SITE ADDRESSES OF THE DENTAL INSURANCE CARRIERS?

Delta Preferred Option Plan, Group # 2999-0011
1/888/335-8227
www.deltadentalca.org

Aetna Dental DMO, Group # 883524-001
1/877/238-6200
www.aetna.com/index.htm

2. DO I HAVE TO ENROLL IN A DENTAL PLAN IF I ALREADY HAVE DENTAL COVERAGE?

Yes. Dental coverage is mandatory for all employees per Board resolution and all labor agreements.

3. WHAT IS THE MAJOR DIFFERENCE BETWEEN AETNA DENTAL DMO AND THE DELTA PREFERRED OPTION PLAN?

Aetna Dental is a DMO (Dental Maintenance Organization) plan, requiring the member to go to an Aetna Dental provider. Aetna Dental monthly rates are significantly less than Delta Preferred Option rates. Delta Preferred Option is a Preferred Provider Plan. Preferred Provider Plans give you the freedom to go to any dentist you chose, however, you will have fewer costs and a greater benefit if you use a Delta Preferred Option Dentist.

4. CAN I CHANGE MY AETNA DENTAL PROVIDER IF I WANT?

You can change to another Aetna Dental Dentist mid-year, but you first must call Aetna and tell them who you would like as your new dentist. Aetna will give you the effective date of the change.

5. WHAT ARE THE ADVANTAGES OF USING A DELTA DENTAL PREFERRED OPTION DENTIST?

When you go to a Preferred Option Dentist you avoid the \$25 annual deductible and your maximum calendar year benefit is \$1,500 compared to \$1,000 if you use a non-Preferred Provider.

6. HOW DO I FIND A DELTA PREFERRED OPTION DENTIST?

You can search for a Preferred Option Dentist on Delta's web site at <http://www.deltadentalca.org/cgi-bin/ProviderSearch.asp>, or you can call Delta Dental at (888) 335-8227, or you can check with Risk Management (x5007) for availability of provider lists.

7. DO I NEED TO NOTIFY DELTA DENTAL OF MY DENTIST SELECTION?

No. Delta Dental does not need to know which dentist you have selected. You can go to any dentist of your choosing and you can change dentists whenever you like.

8. WHAT ARE THE DEPENDENT ELIGIBILITY REQUIREMENTS?

Aetna Dental DMO Plan: Eligible dependents include husband or wife, domestic partner, and dependent children until their 26th birthday.

Delta Preferred Option Plan: Eligible dependents include husband or wife, domestic partner, and dependent children until their 26th birthday.

9. WHEN CAN I ENROLL MY DEPENDENTS ON MY DENTAL PLAN?

Newly acquired dependents, (birth, adoption, marriage) can be added to your Dental plan within 60 days of the date of the event. You can also enroll dependents during the annual open enrollment period.

10. WHEN CAN I DELETE DEPENDENTS FROM MY DENTAL PLAN?

Dependents can be deleted when they lose eligibility (age 26, loss of dependent status, divorce, etc), or during the annual open enrollment period.

11. MY SPOUSE WAS JUST HIRED BY THE COUNTY AND IS THEREFORE REQUIRED TO ENROLL IN A DENTAL PLAN. CAN I DELETE HIM/HER FROM MY DENTAL PLAN OUTSIDE OF THE OPEN ENROLLMENT PERIOD?

Yes. Under these circumstances, you do not have to wait for open enrollment.

12. IF I TERMINATE COUNTY EMPLOYMENT WHEN WILL MY DENTAL COVERAGE END?

Dental coverage ends the end of the month following the month in which you terminate. Example: Employee terminates August 12; dental coverage ends September 30.

13. CAN I CONTINUE MY COVERAGE AFTER EMPLOYMENT?

Yes. You can continue coverage for yourself and dependents for a maximum of 18 months through a federal law called COBRA, unless you have comparable group coverage available to you through another employer. The cost of coverage will be the monthly cost of insurance plus 2%.

14. IS COBRA COVERAGE AVAILABLE TO MY DEPENDENT WHO LOST COVERAGE BECAUSE HE/SHE WAS NO LONGER ELIGIBLE?

Yes. COBRA coverage will normally be available for a maximum of 36 months. The cost for coverage is the monthly cost of insurance plus 2%.

15. HOW DO I FIND OUT MORE ABOUT COBRA?

For general questions regarding eligibility and costs you can contact Risk Management at ext. 5012. If you or a dependent is losing coverage you will automatically receive COBRA information from the Auditor-Controller's Office. It is always advisable to notify the Auditor's Office of your interest in COBRA coverage and to confirm they have your correct mailing address.